

Patricia Booker

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) | | | | | | SERIAL NO. | FILING DATE | | | | | | |
|--|----------|------|------------------------------------|------|------------------------------------|--------------|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | | | | | | 10/578035 | | | | | | | |
| | | | | | | APPLICANT(S) | | | | | | | |
| CLAIMS | | | | | | | | | | | | | |
| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | | | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
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